ON SALACIOUS LITERATURE

A STATEMENT BY THE NEW YORK ACADEMY OF MEDICINE PREPARED BY THE COMMITTEE ON PUBLIC HEALTH

THE New York Academy of Medicine has explored the medical aspects of the current prevalence of salacious publications displayed in New York City on newsstands and circulated by mail.

During the Academy's deliberations, a Subcommittee of the Committee on Public Health inspected a collection of paperback books, magazines, records, and illustrated advertising leaflets and folders with order forms attached; the contents of these ranged from erotic through libidinous to outright lascivious and lecherous. All the publications were copiously illustrated with nearly or totally nude male or female figures. Although some samples in the collection were marked "For Adults," it is believed that the greater proportion of the subject matter is purposefully directed toward teenagers. They are said to constitute a substantial segment of its readers.

From its own observations the Academy gained the impression that the prevalence of salacious literature has increased. Claims have been made that there is increased display of these publications on newsstands, with attendant greater circulation and sales. Their easy availability has been noted in newspaper reports and is being deplored in family magazines. Police action against sales of them has been stepped up in recent weeks. Beyond these general impressions, however, the Academy was unable to obtain accurate, authoritative data on the magnitude of the present sales of this literature or of an increase. It was noted that most of the material examined was published in New York City, with only a small proportion coming from outside New York State.

On the basis of the incomplete information submitted to it, the Academy is of the opinion that the reported increase in sales of salacious literature to adolescents is one of a number of social ills reflecting a breakdown in the home and an inadequate environment. Since adverse forces seem to be concentrated on teenagers, deliberations on the problem were limited to effects of erotic literature on this age group.

The Academy believes that although some adolescents may not be affected by the reading of salacious literature, others may be more vulnerable. Such reading encourages a morbid preoccupation with sex and interferes with the development of a healthy attitude and respect for the opposite sex. It is said to contribute to perversion. In the opinion of some psychiatrists, it may have an especially detrimental effect on disturbed adolescents.

Behavior is complex. It is difficult, if not impossible, to prove scientifically that a direct causal relation exists between libidinous literature and socially unacceptable conduct. Yet, it is undeniable that there has been a resurgence of venercal

disease, particularly among teen-age youth, and that the rate of illegitimacy is climbing. It may be postulated that there is a correlation between these phenomena and the apparent rise in the sale of salacious literature, and perhaps it is causal, but the latter observation cannot be definitely demonstrated. It can be asserted, however, that the perusal of erotic literature has the potentiality of inciting some young persons to enter into illicit sex relations and thus of leading them into promiscuity, illegitimacy and venereal disease.

In the opinion of the Academy, permanent relief from the sale of salacious literature to teenagers can come only through greater parental influence in the proper direction in the home and better environmental conditions in the neighborhood. For social values to be effective, they must be inculcated in youth during the developmental period. Toward improvement of the environment, adequate recreational facilities are urgently needed to provide a wholesome outlet for youthful energy.

The Academy is cognizant that the foregoing suggestions represent a long-term approach. Meanwhile, in order to meet the present emergent situation, it appears essential that legal steps should be taken. Taking as precedents the limitation on sales of liquor and the viewing of certain motion pictures to young persons below stated ages, the Academy recommends that legislation designed to make salacious literature unavailable to minors by prohibiting sale of it to them be formulated and introduced in the 1964 session of the New York State Legislature.

Approved by the Committee on Public Health, The New York Academy of Medicine, May 6, 1963.

Approved by Harold Brown Keyes, M.D., President, The New York Academy of Medicine, May 8, 1963.

THE AMERICAN ACADEMY OF ALLERGY REGISTRY FOR INSECT STING REACTORS

As of March, 1963, over 2,000 questionnaires have been completed and returned to the Insect Registry of the Insect Allergy Committee from persons allergic to insect stings. Some 1,477 of these have been analyzed. In treated patients, we are now asking for details of hyposensitization so we can determine the minimal amount of treatment these people require to produce a satisfactory and reasonably long-lasting result.

There can no longer be any question of the efficacy of desensitization for insect sting allergy. Of 311 persons desensitized and restung, only 3 per cent, or 9 persons, noted a worse reaction than previous to treatment, 24 felt their reaction was unchanged and 273 (88 per cent) described improvement over their pretreatment state. (The severity of the subsequent reaction was not known for five individuals.) This compares with 479 nontreated and restung persons of whom 300 (63 per cent) showed a worse reaction, 130 had unchanged severity of reaction and 49 noted that the reaction was milder from the subsequent sting. The effect of desensitization was equally favorable for local and general reactions of all degrees of severity. Hyposensitization is recommended whenever possible for persons who have had one or more systemic immediate-type allergic reactions to insect stings.

The effect of oral medication taken at the time of sting was tabulated for nondesensitized persons who had had a slight systemic reaction followed by another sting. Fifty such persons took oral medication, and 48 persons took no medication. In comparing these two groups, oral medication had no discernible effect on the over-all severity of sting reaction.

The committee recommends that in the absence of any serious medical contraindications, known insect sting-sensitive persons receive prescriptions for a kit containing either an epinephrine aerosol for inhalation or epinephrine by injection to which supplemental antihistamine and steroid tablets may be added. Steroids or antihistamines do not act quickly enough in the acute emergency but are useful adjuncts. Isoproterenol sublingual tablets may be put in the "emergency kit", but this drug does not counteract shock. Affected persons should be given advice on avoidance of stinging insects and told how to minimize spread of venom by use of tourniquet or local application of ice. Flicking, not mashing, the venom sac of a bee to remove it within two minutes of the sting reduces the venom volume injected.

Bees, wasps, yellow jackets and hornets were the most commonly named offenders. Other insects named included ant, asp, deer fly, mosquito, and triatoma. August was the month of highest incidence of sting reactions. Reactions showed no tendency to be more severe in the latter part of the summer as compared with early summer.

Of 1477 registrants, 837 are male and 640 female. The percentage of males

exceeded that of females in every age group through age 20. After age 20 the percentage of females exceeded that of the males. In every age group the incidence of "local only" reactions is greater for females than for males. In contrast, males have a higher proportion of severe reactions even in the "over 20 years of age" categories. For both sexes the proportion of severe reactions increases steadily with age. Thirty-three per cent of 1,477 persons gave a personal history of hay fever, asthma or other specific evidence of atopy. An additional 371 (25 per cent) stated that these conditions occurred in blood relatives. Of 483 persons with an atopic personal history, 154 or 32 per cent described intolerance to drugs. Of the 423 persons with a negative personal and family history of atopy only 62 (15 per cent) described drug intolerances. Severe reactors were equally common in both groups. Hyposensitation was equally efficacious for both groups.

The Committee would appreciate receiving additional names and addresses of insect-sting allergic persons for registration in this questionaire-type study. These names should be sent to the:

Executive Office, The American Academy of Allergy, 756 North Milwaukee Street Milwaukee 2, Wisconsin

or, for the New York City metropolitan area, to:

James H. Barnard, M.D., Regional Representative, Insect Registry, Insect Allergy Committee 140 East 54 Street New York 22, New York